

Issue Classification 	Application/Control No. 09/175,905	Applicant(s)/Patent under Reexamination HICKS ET AL.
	Examiner William L. Bashore	Art Unit 2176

ISSUE CLASSIFICATION												
ORIGINAL				INTERNATIONAL CLASSIFICATION								
CLASS		SUBCLASS		CLAIMED			NON-CLAIMED					
715		523		G	06	F	15 /00	/				
CROSS REFERENCES								G	06	F	17 /00	/
CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)											
715	500.1											/
358	1.15											/
709	321											/
												/
												/
												/
												/
(Assistant Examiner) (Date)				WILLIAM BASHORE PRIMARY EXAMINER <i>William L. Bashore 3/1/2006</i> (Primary Examiner) (Date)				Total Claims Allowed: 92				
(Legal Instruments Examiner) (Date)								O.G. Print Claim(s)		O.G. Print Fig.		
				1				2				

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant			<input type="checkbox"/> CPA			<input type="checkbox"/> T.D.			<input type="checkbox"/> R.1.47		
Final	Original		Final	Original		Final	Original		Final	Original	
1	1		22	31		61	91		121	151	
2	2		28	32		62	92		122	152	
3	3		33	33		63	93		123	153	
11	4		37	34		64	94		124	154	
12	5		35			65	95		125	155	
4	6		36			66	96		126	156	
	7		37			67	97		127	157	
19	8		38			68	98		128	158	
5	9		38	39		69	99		129	159	
13	10		34	40		70	100		130	160	
20	11		29	41		71	101		131	161	
26	12		23	42		41	102		132	162	
27	13		16	43		73	103		133	163	
21	14		8	44		74	104		134	164	
14	15			45		75	105		135	165	
6	16			46		76	106		136	166	
	17			47		77	107		137	167	
	18			48		78	108		138	168	
	19			49		79	109		139	169	
	20			50		80	110		140	170	
	21			51		81	111		141	171	
	22			52		82	112		142	172	
	23			53		83	113		143	173	
32	24			54		84	114		44	144	
	25			55		85	115		47	145	
	26			56		86	116		48	146	
	27			57		87	117		49	147	
	28			58		88	118		57	148	
7	29			59		89	119		58	149	
15	30			60		90	120		50	150	

Issue Classification 	Application/Control No. 09/175,905	Applicant(s)/Patent under Reexamination HICKS ET AL.
	Examiner William L. Bashore	Art Unit 2176

ISSUE CLASSIFICATION

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant		<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original
	211		241		271		301
	212		242		272		302
	213		243		273		303
	214		244		274		304
	215	55	245		275		305
87	216	63	246		276		306
	217	70	247		277		307
	218	76	248		278		308
	219	81	249		279		309
	220	85	250		280		310
	221	88	251		281		311
	222		252		282		312
	223		253		283		313
	224		254		284		314
	225		255		285		315
	226		256		286		316
	227		257		287		317
	228		258	90	288		318
	229		259	46	289		319
	230		260	92	290		320
	231		261	10	291		321
	232		262	18	292		322
	233		263	25	293		323
	234		264	31	294		324
	235		265	36	295		325
	236		266	40	296		326
	237		267	43	297		327
	238		268	45	298		328
	239		269	56	299		329
	240		270	64	300		330